

DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS

FOURTH EDITION

TEXT REVISION

DSM-IV-TR™

AMERICAN PSYCHIATRIC ASSOCIATION

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U.S. Serial No.: 09/899,732
Filed: July 5, 2001
Exhibit A

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Manufactured in the United States of America on acid-free paper.

American Psychiatric Association
1400 K Street, N.W., Washington, DC 20005
www.psych.org

The correct citation for this book is American Psychiatric Association: *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition, Text Revision. Washington, DC, American Psychiatric Association, 2000.

Library of Congress Cataloging-in-Publication Data

Diagnostic and statistical manual of mental disorders : DSM-IV.—4th ed., text revision.
p. ; cm.

Prepared by the Task Force on DSM-IV and other committees and work groups of the American Psychiatric Association.

Includes index.

ISBN 0-89042-024-6 (casebound : alk. paper)—ISBN 0-89042-025-4 (pbk. : alk. paper)

1. Mental illness—Classification—Handbooks, manuals, etc. 2. Mental illness—Diagnosis—Handbooks, manuals, etc. I. Title: DSM-IV. II. American Psychiatric Association. III. American Psychiatric Association. Task Force on DSM-IV.

[DNLM: 1. Mental Disorders—classification. 2. Mental Disorders—diagnosis.

WM 15 D536 2000]

RC455.2.C4 D536 2000

616.89'075—dc21

00-024852

British Library Cataloguing in Publication Data

A CIP record is available from the British Library.

Text Design—Anne Barnes

Manufacturing—R. R. Donnelley & Sons Company

Adjustment Disorders

Diagnostic Features

The essential feature of an Adjustment Disorder is a psychological response to an identifiable stressor or stressors that results in the development of clinically significant emotional or behavioral symptoms. The symptoms must develop within 3 months after the onset of the stressor(s) (Criterion A). The clinical significance of the reaction is indicated either by marked distress that is in excess of what would be expected given the nature of the stressor or by significant impairment in social or occupational (academic) functioning (Criterion B). In other words, a reaction to a stressor that might be considered normal or expectable can still qualify for a diagnosis of Adjustment Disorder if the reaction is sufficiently severe to cause significant impairment. This category should not be used if the disturbance meets the criteria for another specific Axis I disorder (e.g., a specific Anxiety or Mood Disorder) or is merely an exacerbation of a preexisting Axis I or II disorder (Criterion C). However, an Adjustment Disorder may be diagnosed in the presence of another Axis I or Axis II disorder if the latter does not account for the pattern of symptoms that have occurred in response to the stressor. The diagnosis of an Adjustment Disorder also does not apply when the symptoms represent Bereavement (Criterion D). By definition, an Adjustment Disorder must resolve within 6 months of the termination of the stressor (or its consequences) (Criterion E). However, the symptoms may persist for a prolonged period (i.e., longer than 6 months) if they occur in response to a chronic stressor (e.g., a chronic, disabling general medical condition) or to a stressor that has enduring consequences (e.g., the financial and emotional difficulties resulting from a divorce).

The stressor may be a single event (e.g., termination of a romantic relationship), or there may be multiple stressors (e.g., marked business difficulties and marital problems). Stressors may be recurrent (e.g., associated with seasonal business crises) or continuous (e.g., living in a crime-ridden neighborhood). Stressors may affect a single individual, an entire family, or a larger group or community (e.g., as in a natural disaster). Some stressors may accompany specific developmental events (e.g., going to school, leaving the parental home, getting married, becoming a parent, failing to attain occupational goals, retirement).

Subtypes and Specifiers

Adjustment Disorders are coded according to the subtype that best characterizes the predominant symptoms:

309.0 With Depressed Mood. This subtype should be used when the predominant manifestations are symptoms such as depressed mood, tearfulness, or feelings of hopelessness.

309.24 With Anxiety. This subtype should be used when the predominant manifestations are symptoms such as nervousness, worry, or jitteriness, or, in children, fears of separation from major attachment figures.

309.28 With Mixed Anxiety and Depressed Mood. This subtype should be used when the predominant manifestation is a combination of depression and anxiety.

309.3 With Disturbance of Conduct. This subtype should be used when the predominant manifestation is a disturbance in conduct in which there is violation of the rights of others or of major age-appropriate societal norms and rules (e.g., truancy, vandalism, reckless driving, fighting, defaulting on legal responsibilities).

309.4 With Mixed Disturbance of Emotions and Conduct. This subtype should be used when the predominant manifestations are both emotional symptoms (e.g., depression, anxiety) and a disturbance of conduct (see above subtype).

309.9 Unspecified. This subtype should be used for maladaptive reactions (e.g., physical complaints, social withdrawal, or work or academic inhibition) to stressors that are not classifiable as one of the specific subtypes of Adjustment Disorder.

The duration of the symptoms of an Adjustment Disorder can be indicated by choosing one of the following specifiers:

Acute. This specifier can be used to indicate persistence of symptoms for less than 6 months.

Chronic. This specifier can be used to indicate persistence of symptoms for 6 months or longer. By definition, symptoms cannot persist for more than 6 months after the termination of the stressor or its consequences. The Chronic specifier therefore applies when the duration of the disturbance is longer than 6 months in response to a chronic stressor or to a stressor that has enduring consequences.

Recording Procedures

The predominant symptom presentation for an Adjustment Disorder should be indicated by choosing the diagnostic code and term from the list above, followed, if desired, by the Acute or Chronic specifier (e.g., 309.0 Adjustment Disorder With Depressed Mood, Acute). In a multiaxial assessment, the nature of the stressor can be indicated by listing it on Axis IV (e.g., Divorce).

Associated Features and Disorders

The subjective distress or impairment in functioning associated with Adjustment Disorders is frequently manifested as decreased performance at work or school and temporary changes in social relationships. Adjustment Disorders are associated with suicide attempts, suicide, excessive substance use, and somatic complaints. Adjustment Disorder has been reported in individuals with preexisting mental disorders in selected samples, such as children and adolescents and in general medical and surgi-